

BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO.	FILING DATE					
						09/914964						
						APPLICANT(S)						
CLAIMS												
1	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		* IND.	* DEP.	* IND.	* DEP.	* IND.	* DEP.
	IND.	DEP.	IND.	DEP.	IND.	DEP.						
2							51					
3							52					
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47							96					
48							97					
49							98					
50							99					
TOTAL IND.	1						100					
TOTAL DEP.	3	↓	↓	↓								
TOTAL CLAIMS	4	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]							

TC-1360 (3-78)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS U.S. DEPARTMENT OF COMMERCE
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